| Application of | or Docket | Number |
|----------------|-----------|--------|
|----------------|-----------|--------|

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |                      |   |                  | SMALL ENTITY TYPE  |                                 |                  | OTHER THAN OR SMALL ENTITY |                     |                        |        |                     |                        |
|---|----------------------|---|------------------|--------------------|---------------------------------|------------------|----------------------------|---------------------|------------------------|--------|---------------------|------------------------|
| TOTAL CLAIMS  |                      | 19  |                  |                    |                                 |                  | RATE                       | FEE                 | Ŭ<br>                  | RATE   | FEE                 |                        |
| FOR   |                      |   | NUMBER F         | R FILED NUMBER     |                                 | R EXTRA          | ļ                          | BASIC FEE           | 355.00                 | OR     | BASIC FEE           | 710.00                 |
| TOTAL CHARGEABLE CLAIMS   |                      |   | 19 minus 20= * O |                    |                                 |                  | X\$ 9=                     |                     | OR                     | X\$18= |                     |                        |
| INDEPENDENT CLAIMS 5 minus 3 = *  |                      |   |                  |                    | 2                               |                  |                            | X40=                | 80                     | OR     | X80=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |                      |   |                  |                    |                                 |                  | +135=                      |                     | OR                     | +270=  |                     |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |                      |   |                  |                    | olumn 2                         |                  | TOTAL                      | 435                 | OR                     | TOTAL  |                     |                        |
| CLAIMS AS AMENDED - PART II   |                      |   |                  |                    |                                 |                  |                            |                     |                        |        | OTHER               |                        |
| _   |                      | (Column 1)                                |                  |                    | mn 2)                           | (Column 3)       | Ģ.,                        | SMALL               |                        | OR     | SMALL               |                        |
| AMENDMENT A   |                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUM<br>PREVI       | HEST<br>MBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |                            | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total _              | . 19                                      | Minus            | ** _               | 20                              | =/               |                            | X\$-9=              |                        | OR     | X\$18=              |                        |
| AME   | Independent          | NTATION OF M                              | Minus            | ***                | T CLAIM                         | = /              |                            | X40=                | * *                    | OR     | X80=                | - a                    |
| L   | FIRST PRESE          | NIATION OF M                              | OLTIFLE DE       | CINDEIN            | TO CANV                         |                  | J                          | +135=               |                        | OR     | +270=               |                        |
|   |                      |   |                  |                    |                                 |                  |                            | TOTAL<br>ADDIT. FEE |                        | OR     | TOTAL<br>ADDIT, FEE |                        |
|   |                      | (Column 1)                                |                  | (Colu              | ımn 2)                          | (Column 3)       |                            | ADDII. FEE          |                        | •      | ADDIT: I EE         |                        |
| AMENDMENT B   |                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIG<br>NUI<br>PREV | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA |                            | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
| NON<br>NON  | Total                | •   | Minus            | **                 |                                 | =                |                            | X\$ 9=              |                        | OR     | X\$18=              |                        |
| AME   | Independent          | *   | Minus            | ***                | T OL AINA                       | =                |                            | X40=                |                        | OR     | X80=                |                        |
|   | FIRST PRESE          | NTATION OF M                              | OLTIPLE DE       | PENDEN             | T CLAIM                         |                  | <b>,</b>                   | +135=               |                        | OR     | +270=               |                        |
|   |                      |   |                  |                    |                                 |                  | ı.                         | TOTAL<br>ADDIT. FEE |                        | OR     | TOTAL<br>ADDIT, FEE |                        |
|   |                      | (Column 1)                                |                  |                    | ımn 2)                          | (Column 3)       |                            |                     |                        | -      |                     |                        |
| AMENDMENT C   |                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NU!<br>PREV        | HEST<br>MBER<br>HOUSLY<br>D FOR | PRESENT<br>EXTRA |                            | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
| NS<br>NS<br>NS<br>NS<br>NS<br>NS<br>NS<br>NS<br>NS<br>NS<br>NS<br>NS<br>NS<br>N   | Total                | •   | Minus            | **                 |                                 | =                | 11                         | X\$ 9=              |                        | OR     | X\$18=              | ï                      |
| NE NE   | Independent          | ·   | Minus            | ***                | IT CL                           | <u> -</u>        |                            | X40=                |                        | OR     | X80=                |                        |
| F   | FIRST PRESE          | NTATION OF M                              | IULTIPLE DE      | PENDEN             | IT CLAIM                        |                  | 1                          | +135=               |                        | OR     | +270=               |                        |
|   | If the entry in colu | ımn 1 is less than                        | the entry in col | umn 2, wri         | ite "0" in co                   | olumn 3.         |                            | TOTAL               |                        |        | TOTAL               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                      |   |                  |                    |                                 |                  |                            |                     |                        |        |                     |                        |